

Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)				Complete If Known				
				Application Number		10/635,081		
				Filing Date		August 6, 2003		
				First Named-Inventor		Argentieri		
				Group Art Unit		1614		
Examiner Name		Phyllis G. Spivack		Attorney Docket Number		AM100632D1		
Sheet		1		of		1		
<b>U.S. PATENT DOCUMENTS</b>								
Examiner Initials*	Cite No.	U.S. Patent Document		Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		
		Number (if known)	Kind Code (if known)					
PS	1.	6,596,759	B2	Abe et al.	07-22-2003			
<b>FOREIGN PATENT DOCUMENTS</b>								
Examiner Initials*	Cite No.	Foreign Patent Document			Name of Patentee or Applicant of Cited document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T
		Office	Number	Kind Code (if known)				
	2.							<input type="checkbox"/>
<b>OTHER PRIOR ART — NON PATENT LITERATURE DOCUMENTS</b>								
Examiner Initials*	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.) date, page(s), volume-issue number(s), publisher, city and/or country where published.						T
PS	3.	SCHRODER, Rikke et al., Neuropharmacology, 40, 888-898 (2001).						<input type="checkbox"/>
PS	4.	SIMS, Stephen et al., J. Physiol., 367, 503-529 (1985).						<input type="checkbox"/>

Examiner Signature	<i>Phyllis Spivack</i>	Date Considered	6/8/05
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 809. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Rev. 9/00